ASABE Request for Non-member Standards Development Participation

Date:						
Name (First, M	I, Last):					
Company:			Job Title	:		
Company address:						
Work phone:						
Mobile (option	al):					
Home address	(optional):					
Contact email (Note: this email will be used for all correspondence and will be linked to ASABE login.):						
Project/commi	ttee to join:					
Request:	Voting	Ok	serving			
Relevant exper	ience/expertise	as related to t	the project:			
Interest areas (please select all applicable areas):						
Academia – associated with an institution of higher learning Consultant – consultants with special interest and expertise in the subject area Extension – consumer/farmer educators affiliated with their state extension services General Interest – other interested parties Government – association with any governmental agency (at any level), be it North American or otherwise Non-governmental Org – association with any agency or organization not directly affiliated with a government organization, be it North American or otherwise Producer – manufacturer of related product Research – associated with research in related areas Safety – expert on safety and health of the operator/Consumer User – end user of a related product Affiliations with other Standards Development Organizations (SDO) or professional societies:						
For Staff use only		No Love	al approved:	Voting	Observing	
Approved for par Reason if denial:	ticipation: Yes	No Leve	el approved:	Voting	Observing	
Processed:		Notified:		A	dministrator:	